FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT **1996**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P37914** **(9)**

1. Corporation Name
RT INDUSTRIES, INC.

Principal Place of Business
751 PARK OF COMMERCE
104
BOCA RATON FL 33487
US

Mailing Address
751 PARK OF COMMERCE
104
BOCA RATON FL 33487
US

3. Date Incorporated or Qualified: 03/16/1992
3a. Date of Last Report: 01/27/1995

2. Principal Place of Business
21 1875 E. LAKE MARY BLVD
Suite, Apt. #, etc. 22
City & State 23 SANFORD FL
Zip 24 32773 Country 25 US

2a. Mailing Address
26 1875 E. LAKE MARY BLVD
Suite, Apt. #, etc. 27
City & State 28 SANFORD FL
Zip 29 32773 Country 30 US

4. FEI Number: 65-0155806 — Applied For ☐ Not Applicable ☐

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent
~~TYGAR, RONALD~~
~~5258 WINDSOR PARKE~~ DR
~~BOCA RATON FL 33496~~

10. Name and Address of New Registered Agent
81 Name: MICHAEL SCICCHITANO
82 Street Address (P.O. Box Number is Not Acceptable): 1875 E. LAKE MARY BLVD
83
84 City: SANFORD FL 85 Zip Code: 32773

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: MICHAEL SCICCHITANO — 1/23/96
Signature (printed name of signer and title or capacity) — (with Registered Agent signature required when indicated) — DATE

12. OFFICERS AND DIRECTORS

TITLE	PCD	☒ DELETE
NAME	TYGAR, RONALD	
STREET ADDRESS	5258 WINDSOR PARK DR	
CITY-ST-ZIP	BOCA RATON FL 33496	
TITLE	STD	☒ DELETE
NAME	TYGAR, NEIL	
STREET ADDRESS	793 CRICKLEWOOD TERRACE	
CITY-ST-ZIP	HEATHROW FL 32746	
TITLE	D	☒ DELETE
NAME	REINES, FLOYD	
STREET ADDRESS	7244 VIA PALOMAR	
CITY-ST-ZIP	BOCA RATON FL 33433	
TITLE	V	☒ DELETE
NAME	BARD, BERNARD H	
STREET ADDRESS	2111 CHERRY HALL WAY	
CITY-ST-ZIP	CORAL SPRINGS FL 33071	
TITLE		☒ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PD	☐ Change ☒ Addition
1.2 NAME	JOHN KENNEY	
1.3 STREET ADDRESS	1875 E. LAKE MARY BLVD	
1.4 CITY-ST-ZIP	SANFORD FL 32773	
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: John K. Kenney — 1/22/96 — (407) 322-8000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)